PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE ree

Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further	s form should be used correspondence includ	for tra	nsmitting the ISS Patent, advance of	UE FEE and PUBLIC	ATION FEE (if requ	iired). B	locks 1 through 5 s	hould be completed when
maintenance fee notifica	ted below or directed of ations.	herwis	e in Block 1, by	(a) specifying a new co	rrespondence address	will be r s; and/or	nailed to the current (b) indicating a sepa	hould be completed when correspondence address a arate "FEE ADDRESS" for
CURRENT CORRESPOND	DENCE ADDRESS (Note: Use E	lock I fo	r any change of address)		Note: A certificate of	mailing	can only be used &	
	•			Oxer C	papers. Each addition:	al naner	such as an assignme	or domestic mailings of the for any other accompanying the formal drawing, must be formal drawing, must be formal drawing, must be formal drawing.
27516		8/2007		(2)	involusionii certificat	c or man	ing of transmission.	-
UNISYS COR	PORATION		(APR 0 4 2007	Cer hereby certify that the	rtificate	of Mailing or Trans	mission
MS 4773 PO BOX 64942 ST. PAUL, MN 55164-0942 APR 0 4 2007 I hereby certify that this Fee(s) Transmittal is being deposited with States Postal Service with sufficient postage for first class mail in a addressed to the Mail Stop ISSUE FEE address above, or being transmitted to the USPTO (571) 273-2885, on the date indicated before the contraction of the								
ST. PAUL, MN		183		ransmitted to the USF	TO (571) 273-2885, on the d	above, or being facsimil ate indicated below.	
			THE MARKON	Emily Vogt		-	(Depositor's name)	
/05/2007 BABRAHA2 (00000001 193790 1	57		Emily Vo	Į.		(Signature)	
	0.00 DA				4/2/07			(Date)
APPLICATION NO. 3.00 DA FILING DATE			FIRST NAMED INVENT		OR ATTORNEY DOCKET NO		NEY DOCKET NO	CONFIRMATION NO.
10/676,187 09/30/2003			Sandra J. Racine PASS07(1056 0121150				7/1056 01211001	
Sandra J. Racine RA5597(1056-013USO1 7107 FITLE OF INVENTION: USER INTERFACE HAVING GRAPHICAL INDICATORS WITH AUTOMATICALLY ADJUSTED SET POINTS								
					- commence A	DJOJIL	D SET FOINTS	
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1400	\$0	\$0		\$1400	06/08/2007
EXAMINER		ART UNIT		CLASS-SUBCLASS	\neg		2.100	00/08/2007
ALLEN, WILLIAM J			3625	705-027000	J			
. Change of corresponde CFR 1.363).	ence address or indication	n of "F	ee Address" (37		e patent front page, lis	et .		
rk 1.303).				(1) the names of up to 3 registered patent atternove 1 Charles A Johnson				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(2) the name of a single firm (having as a mark as 2 "Richard I Gregson				
"Fee Address" indication (or "Fee Address" Indication for PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Conumber is required.			tion form of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3 Shumaker & Sieffert				
. ASSIGNEE NAME AT	ND RESIDENCE DATA	ТОВ	E PRINTED ON 1					
PLEASE NOTE: Unle	ess an assignee is identi	fied be	low, no assignee	data will appear on the	patent. If an assion	ee is ide	ntified below the de	comment has been \$1.10
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE								
· , , , , , , , , , , , , , , , , , , ,			•	(B) RESIDENCE: (CI	ΓY and STATE OR C	OUNTR	Y)	
Unisys Corpora	tion			Blue Bell, MN				
lease check the appropri	ate assignee category or	catego	ries (will not be pri	-	Individual Ki Co	moration	on other misself	up entity Government
						-		
a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								hown above)
Publication Fee (No small entity discount permitted)				A check is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies1				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-3790 (enclose an extra copy of this form).				
Change in Entity State	us (from status indicated			overpayment, to De	posit Account Number	19-37	90 (enclose an	extra copy of this form).
a. Applicant claims	SMALL ENTITY status	above) See 3	l					
OTE: The Issue Fee and	Publication Fee (if requ	ired) w	ill not be accepted	b. Applicant is no lo	the applicant: a ragio	L ENTIT	TY status. See 37 CF	R 1.27(g)(2).
terest as snown by the re	cords of the United State	es Pate	nt and Trademark	Office.	the applicant, a regis	tered atto	orney or agent; or the	R 1.27(g)(2). assignee or other party in
Authorized Signature	1	m			Date <u>4/2</u>			
Typed or printed name <u>Beth L. McMahon</u>				Registration No. 41,987				
is collection of informat application. Confidentia bmitting the completed	ion is required by 37 CF ality is governed by 35 I application form to the	R 1.31 J.S.C. USPTC	1. The information 122 and 37 CFR 1	is required to obtain of	retain a benefit by th stimated to take 12 m	e public	which is to file (and locomplete, including	by the USPTO to process) gathering, preparing, and

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.